# THE DARRELL ATCHLEY NEW MEXICO CHIROPRACTIC ASSOCIATION SCHOLARSHIP FUND

# **Scholarship Awards**

# **Information and Application**

#### **Purpose**

To recognize academic excellence and provide financial assistance to New Mexico Resident college students enrolled in accredited chiropractic colleges.

# Eligibility/Criteria

Applicant must be a New Mexico Resident student in good standing at an accredited chiropractic college in the United States. A minimum grade point average (GPA) of 2.5 and a 4.0 scale is recommended. The student must be attending school full-time and be in at least his or her fourth quarter or third trimester of study.

All applicants are to provide their College ID# in the upper right hand corner of ALL submitted materials whenever possible. Please note ONLY your College ID# (not your name) on items five and six listed below.

The completed Scholarship Application must be accompanied by the following:

- Official recommendation from the college's Scholarship Committee or Financial Aid Office:
- 2. Two letters of recommendation from faculty members;
- 3. Official transcript showing current GPA:
- 4. A completed, legible, and signed application form;
- 5. A brief statement on why you should be the recipient of the scholarship, including financial need:
- 6. A 500-1000 word essay on your choice of one of the following questions:
  - a. How do you envision chiropractic in the year \_\_\_\_\_?
  - b. Why did you choose chiropractic as a career, and how do you intend to apply your education after graduation?
  - c. What should the role of the ACA be in relation to students attending Chiropractic College? To practicing Doctors of Chiropractic?
  - d. What are the pros and cons of membership participation of Doctors of Chiropractic in professional, fraternal and community organizations?
- 7. Two copies of the essay, double-spaced, on white, 8 1/2 x 11" paper, should be submitted.

Please provide a current e-mail address that will not change until after the awards are announced to ensure you receive all pertinent information as quickly as possible.

Application and additional materials must be received by March 1 and October 1 of each year and mailed to:

New Mexico Chiropractic Association Scholarship Committee p.O. Box 20399
Albuquerque NM 87154
ATTN: Dr. William Smith

\*\*\*Incomplete submissions will not be considered.\*\*\*

# **Selection Process**

All applications will be reviewed and rated by each member of the New Mexico Scholarship Committee. The Committee will then discuss the entries and reach consensus via conference call. At a minimum, this committee consists of:

- 1. Chairman of the New Mexico Chiropractic Association Scholarship Committee;
- An additional Doctor of Chiropractic from the NMCA Scholarship Committee; and.
- The President of the NMCA or an appointed member of the Board of Directors of the NMCA.

All committee members must be Doctors of Chiropractic and members of the NMCA in good standing. In the event of a tie, the recommendations will be forwarded to the NMCA Board for final action.

### Notification

Recipients for the year for which the application was received will be announced during the NMCA Annual Convention and Annual Business Meeting held in April of that year.

Monies will be forwarded to the student by June 1 and December 31 each year and made payable to the school, to be applied to his or her tuition, book, or supply expenses.

### Award Monetary Value

Up to two scholarships will be awarded each year of \$500.00 each. This may vary from year to year, as determined by the NMCA Board of Directors.

# NEW MEXICO CHIROPRACTIC ASSOCIATION SCHOLARSHIP FUND APPLICATION

Year	

General Information						
Name		College ID#	SSN#			
Present Address						
Permanent Address						
Home Phone ( )	Work PI	none ( )	E-mail			
Home Phone ( ) Fax ( )	_Are you the fina	ncial head of yo	ur household?	YesNo		
Chiropractic Education						
Name of College						
Address						
Phone ()	Current GPA					
Last Term Completed_	edExpected Graduation Date					
Other Educational Infor	<u>mation</u>					
List schools and collegenate Name	es attended, inclu Address	ding high schoo	l: <u>Years Attended</u>	Degree Earned		
Have you ever been paction taken against yo Yes Please descri	u or which is pen	ding?				
Have you received any Yes Please descri				No		
Please describe extra-offices held; attach sep						
Financial Information What is your total mont What is your current to What are your total mo	al in assets (bank	k accounts, acce	essible trusts, investn	nents)?		
Please mail complete authorization, stateme Albuquerque, NM 871 application year.	nt and essay to	: NMCA Scho	larship Committee,	P. O. Box 20399,		
Signatura			Data			